FOR OFFICE USE ONLY:		EBEA2-2014 2 Page Form
APPLICATION NUMBER:	_ DATE RECEIVED:	
		V YO

## SUFFOLK COUNTY BOARD OF ETHICS

335 Yaphank Avenue, Yaphank, New York 11980 · Office 631.852.4038 · Fax 631.852.4041

## Extension Application for Financial Disclosure Statement

Form EBEA2-2013

For filers subject to financial disclosure reporting under the Suffolk County Code §77-10 (B) and (C) in accordance with Suffolk County Board of Ethics Resolution No. 012-2013

**Directions:** Use this form to apply for an extension of time for filing an annual Financial Disclosure Statement due to justifiable cause or undue hardship.

Complete the box below and page two of this form "Statement of Justifiable Cause or Undue Hardship."

Pursuant to the Suffolk County Code Section 77-11 (C), a request for a filing date after September 1, 2014 will not be considered.

APPLICANT'S NAME		
DEPARTMENT	/ AGENCY / BOARD OR COMMITTEE	
EMAIL ADDRE	SS	
TELEPHONE N	UMBER (SPECIFY HOME OR BUSINESS)	
HOME	NUMBER & STREET	
ADDRESS	CITY, STATE & ZIP	
	AGENCY	
WORK ADDRESS	NUMBER & STREET	
1122200	CITY, STATE & ZIP	
	JOB TITLE	

Statement of Justifiable	e Cause or Undue I	Hardship:
		Date:
I,(Insert Your Name)	_, hereby apply for an	additional period of time for
filing my 2014 Financial Disclosure Statemer	nt based on justifiable	cause or undue hardship.
Applicant's Signa	ature:	
Printed Name:		
		FOR OFFICE USE ONLY
		(STAMP RECEIVED)